

PRECINCT DELEGATE WRITE-IN CANDIDATE DECLARATION OF INTENT

(NAME OF CITY OR TOWNSHIP)

An individual who wishes to seek a precinct delegate position with write-in votes must file this form with the clerk of his or her city or township of residence by 4:00 p.m. on the Friday preceding the August primary. As an alternative, an individual who wishes to seek a precinct delegate position with write-in votes may file this form with his or her precinct board on the day of the August primary anytime prior to the close of the polls.

Name _____
(Print or Type)

Residence Address _____
(Street Address) (Post Office) (Zip Code)

☐ City or ☐ Township of _____

I am registered and qualified to vote at this address: ☐ Yes ☐ No Birth date ____/____/____

Home Phone (____) _____ Business Phone (____) _____

DATE OF PRIMARY: ____/____/____

OFFICE SOUGHT: Precinct Delegate.

Precinct No. _____

Political Party _____

By signing this affidavit, I swear that the statements made above are true and do hereby declare my intent to seek the precinct delegate position identified above with write-in votes.

SIGNATURE OF WRITE-IN CANDIDATE: _____

Subscribed and sworn to by _____ Name of Notary _____

before me on the _____ day of _____, _____ Notary Public, State of Michigan, County of _____

_____ My commission expires _____

_____ Acting in the County of _____

Signature of notary public

OFFICE USE ONLY

OFFICE CODE _____

DATE OF FILING ____/____/____

RECEIVED BY _____